

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION**

In re:

RYAN TOOMEY

Debtor(s)

Case No. 09-08910

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Glenn Stearns, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 03/17/2009.
- 2) The plan was confirmed on 06/19/2009.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. § 1329 on NA.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on 10/23/2009.
- 5) The case was converted on 11/06/2009.
- 6) Number of months from filing to last payment: 4.
- 7) Number of months case was pending: 8.
- 8) Total value of assets abandoned by court order: NA.
- 9) Total value of assets exempted: \$850.00.
- 10) Amount of unsecured claims discharged without payment: \$0.00.
- 11) All checks distributed by the trustee relating to this case have cleared the bank.

Receipts:

Total paid by or on behalf of the debtor	\$810.00
Less amount refunded to debtor	\$0.00

NET RECEIPTS: **\$810.00**

Expenses of Administration:

Attorney's Fees Paid Through the Plan	\$767.07
Court Costs	\$0.00
Trustee Expenses & Compensation	\$42.93
Other	\$0.00

TOTAL EXPENSES OF ADMINISTRATION: **\$810.00**

Attorney fees paid and disclosed by debtor: \$366.00

Scheduled Creditors:

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
ADVOCATE HEALTHCARE	Unsecured	6,500.00	NA	NA	0.00	0.00
ATG CREDIT	Unsecured	569.00	NA	NA	0.00	0.00
ATG CREDIT	Unsecured	569.00	NA	NA	0.00	0.00
DIVERSIFIED SRVS	Unsecured	128.00	NA	NA	0.00	0.00
DUPAGE MEDICAL CLINIC	Unsecured	861.00	NA	NA	0.00	0.00
ELMHURST DENTAL CARE	Unsecured	324.00	323.54	323.54	0.00	0.00
ELMHURST MEMORIAL	Unsecured	319.20	NA	NA	0.00	0.00
HILTON FAMILY	Unsecured	140.00	NA	NA	0.00	0.00
ILLINOIS COLLECTION SERVICES	Unsecured	672.00	NA	NA	0.00	0.00
MARY JENNINGS MD	Unsecured	160.00	174.00	174.00	0.00	0.00
MED BUSINESS BUREAU	Unsecured	746.00	NA	NA	0.00	0.00
MED BUSINESS BUREAU	Unsecured	251.00	NA	NA	0.00	0.00
MERCHANTS CREDIT GUIDE	Unsecured	159.00	NA	NA	0.00	0.00
NORTHWEST COLLECTORS	Unsecured	75.00	NA	NA	0.00	0.00
RADIOLOGISTS OF DUPAGE	Unsecured	420.00	NA	NA	0.00	0.00
ST IL TOLLWAY AUTHORITY	Unsecured	8,520.00	18,869.50	18,869.50	0.00	0.00
THE BUREAUS	Unsecured	60.00	NA	NA	0.00	0.00
TRI STATE FIRE PROTECTION DIST	Unsecured	1,000.00	NA	NA	0.00	0.00

Summary of Disbursements to Creditors:			
	Claim <u>Allowed</u>	Principal <u>Paid</u>	Interest <u>Paid</u>
Secured Payments:			
Mortgage Ongoing	\$0.00	\$0.00	\$0.00
Mortgage Arrearage	\$0.00	\$0.00	\$0.00
Debt Secured by Vehicle	\$0.00	\$0.00	\$0.00
All Other Secured	\$0.00	\$0.00	\$0.00
TOTAL SECURED:	\$0.00	\$0.00	\$0.00
Priority Unsecured Payments:			
Domestic Support Arrearage	\$0.00	\$0.00	\$0.00
Domestic Support Ongoing	\$0.00	\$0.00	\$0.00
All Other Priority	\$0.00	\$0.00	\$0.00
TOTAL PRIORITY:	\$0.00	\$0.00	\$0.00
GENERAL UNSECURED PAYMENTS:	\$19,367.04	\$0.00	\$0.00

Disbursements:		
Expenses of Administration	<u>\$810.00</u>	
Disbursements to Creditors	<u>\$0.00</u>	
TOTAL DISBURSEMENTS :		<u>\$810.00</u>

12) The trustee certifies that the foregoing summary is true and complete and all administrative matters for which the trustee is responsible have been completed. The trustee requests that the trustee be discharged and granted such relief as may be just and proper.

Dated: 11/17/2009

By: /s/ Glenn Stearns

Trustee

STATEMENT: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.